INSTRUCTIONS FOR PREPARING Foreign National Data Card for Unclassified Foreign Visits and Assignments to WAPA (WAPA F 3000-72#- 03-06)

2. IT/Cyb	Form: stor- Meeting host initiates the form at least 30-45 days before planned visit er Security Approval with any computer access hal Manager (or Acting Official) for approval signature
4. Origina	al to Regional Safety and Security Office (The Safety and Security office reviews and sends to O-Security Office)
☐5. CSO S	Security (Conducts required inquiries with DOE) val sent to Regional Safety and Security Officer
_	nal Safety and Security Officer notifies host and front desk personnel of approval/denial
	w time for background checks, this form must be completed at least 30 days for non- sensitive countries visitors, and 45 days for visitors from sensitive countries. For more information and a list of sensitive countries go to: http://www.cso.wapa.gov/cpo/3700/SECURITY/fva.htm
	(Failure to complete this approval process may result in denial of visit.)
	Section A – PERSONAL DATA INFORMATION
BLOCK 1. BLOCK 2. BLOCK 3. BLOCK 4. BLOCK 5.	Employee name: Last name; first name, middle name Select Male or Female: Place a check mark in the appropriate box Country of Birth: Spell out. No abbreviations City of Birth: Spell out. No abbreviations Home Address: Self-explanatory
BLOCK 6. BLOCK 7. BLOCK 8. BLOCK 9. BLOCK 10. BLOCK 11.	Date of Birth: Month/Day/Year Social Security Number: Self-explanatory Country of Citizenship: Spell out. No abbreviations Passport/Visa/Immigration Number: One must be supplied Country of Issue of Passport/Visa/Immigration Number Expiration Date: of above issued document Month/Day/Year
BLOCK 12. BLOCK 13. BLOCK 14.	Section B – EMPLOYMENT DATA Current Employer/Business Name: Self-explanatory Business Address: Self-explanatory Business Phone: Self-explanatory Section C – COMPUTER ACCESS & NETWORK CONNECTIVITY
BLOCK 15. BLOCK 16. BLOCK 17. BLOCK 18. BLOCK 19. BLOCK 20.	Do you have computer need: Answer yes or no Are you bringing a computer on site: Yes or no Do you need access to WAPA's Information Systems: Yes or no Will you need to install software application to perform presentation(s): Yes or no Do you require internet access: Yes or no Will the visitor/assignee have external devices (flash drive, removable drive, cd's, disk, others): Yes or no Section D – VISIT DATA INFORMATION
BLOCK 21. BLOCK 22. BLOCK 23. BLOCK 24. BLOCK 25. BLOCK 26. BLOCK 27. BLOCK 28.	Buildings/Sites/Areas to be Visited: Be specific (note: Must be escorted by host at all times) Request Date: Date host is submitting this request for approval Name and Signature of DOE Host: Must be a supervisor Contact # - Host's # Is the host a U.S. Citizen: Yes/No Purpose of Visit: State clear purpose/be very specific Will sensitive or OUO be discussed? Describe what? Start Date of Visit: Month/Day/Year
BLOCK 29. BLOCK 30. BLOCK 31. BLOCK 32.	End Date of Visit: Month/Day/Year Authorized SES Manager Administrator Signature: Regional Manager or SES. IT/Cyber Security Office Approval: IT/Cyber signature and approval w/any computer access Authorized Approval Signature CSO Security Office –visit not approved without this signature

SECTION A – PERSONAL DATA					
1. Name of Visitor: (Last)	(First)	(M	liddle)		
2. Male Female					
3. Country of Birth:	6. Date of Birth:	8. Citizenship:			
4. City of Birth:	/ /7. Social Security Number:	9. Passport/Visa/I	mmigration Numbers:		
5. Home Address:	7. Social Security Number.	10. Country of Iss	sue:		
		11. Expiration Dat	te:		
SECT	ION B - EMPLOYMENT DAT	- A			
12. Employer/Business Name:	13. Business Address:				
	14. Phone:				
	14. FIIONE.				
SECTION C - COMPUTER ACCESS AND NETWORK CONNECTIVITY					
15. Do you have computer needs?	16. Are you bringing co	16. Are you bringing computer on site? ☐ Yes ☐ No			
17. Do you need access to WAPA's Information System? ☐ Yes ☐ No	18. Will you need to install software applications to perform presentation(s)? ☐ Yes ☐ No				
19. Do you require internet access? Yes N	removable drive, c	20. Will the visitor/assignee have external devices (flashdrive, removable drive, cd's, disks, others) that they will be bringing on site? ☐ Yes ☐ No			
SECTION D - VISIT DATA					
21. Buildings/Sites to be Visited:					
22. Request Date:	23 Name and Signatu	23. Name and Signature of DOE Host:			
ZZI Noquosi Suio.	20. Nume and digitatore of BOL Floot.				
24. Contact #:		25. Is the host a U.S. Citizen?: Yes No			
26. Purpose of Visit/Assignment (be very specific):					
27. Will sensitive or Official Use Only (OUO) information be discussed? Yes No If yes, what? (be specific)					
28. Start Date of Visit:	29. End Date of Visit:	29. End Date of Visit:			
		1			
30. Authorized SES Manager Administrator - Signa	ture:		Date:		
31. IT/Cyber Security Office Approval - Signature:			Date:		
32. Security Office Approval - Signature:		Date:			